

Minor Variance Request Form

Before completing this form, contact the Bureau of Water Management's Program Support & Outreach Section or the Water Permits Ombudsman, Bryan Sousa at 860-424-3848, to verify whether the minor variance in question is eligible for review and approval by DEP. Also, consult the *General Permit for Miscellaneous Discharges of Sewer Compatible Wastewater* Guidance Document, Questions & Answers Section for further information regarding the Minor Variance Provision.

Part I: Registrant/Permittee Information

Registrant/Permittee:					
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Site Address:		State:	Zip Code: -		
City/Town: Name of Receiving POTW:		State.	Zip Code		
Name of Necelving Forw.					
Part II: General Permit Information					
Type of General Permit:					
Permit Number (if applicable):					
Part III: Description of Variance					
☐ If additional sheets are necessary, please label and attach them to this sheet and enter a check mark.					
1.	List the requirement for which the variance is sought (if applicable, list the subject pollutant and its effluent limit listed in the subject general permit).				
2.	Description of variance:				
3.	Describe and submit with this form, documen of the variance will not result in any violation analyses which describe concentration of the	of the subject general pe	ermit. (If applicable, attach lab		

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Part IV: Certification

"This document and any attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information contained in this form is, to the best of my knowledge and belief, true, accurate and complete. I understand that a false statement made in this information may be punishable as a criminal offense, in accordance with Section 22a-6 of the General Statutes, pursuant to Section 53a-157b of the General Statutes, and in accordance with any other applicable statute."			
Signature of Permittee	/ / Date		
Name of Permittee (print or type)	Title (if applicable)		

Note: Please submit the Minor Variance Request Form to:

PROGRAM SUPPORT & OUTREACH WATER MANAGEMENT BUREAU/PERD DEPARTMENT OF ENVIRONMENTAL PROTECTION 79 ELM STREET HARTFORD, CT 06106-5127